

and the resulting paralysis. A baby's brain, she reminded her class, at birth weighed an eighth of the whole body, and developed more in the first two years than in the whole of its subsequent life. Its nervous system was very unstable, and she would almost say that a stupid, placid woman made the best nurse. It was a mistake to be always talking to and jumping an infant about. It should be kept as quiet as possible.

Pregnancy had a great effect on the nervous system. A great authority had once said that a pregnant woman was affected to her finger tips. The disturbances, however, were functional; there were no physiological changes to account for it. Pregnancy would find out the weak spot in a woman. She instanced sickness, depression, alteration of temperament, indigestion, longing for different food. She herself believed that the latter was often caused by auto-suggestion.

It was important that midwives should learn to recognise different types among their patients. They should let their patients talk to them, instead of talking themselves. Sister Olive said that the Christian Scientists had taught us a good deal of the power of the mind over the body; and the best midwives were probably those of a sanguine temperament. She thought great care should be taken about what was said before a patient, and had known that when after examination, a second vertex was diagnosed, the woman was convinced it meant twins.

"The patients," said Sister Olive, "are my children; I have an immense respect for the working class."

She concluded her lecture, by urging the class to enter for the examination at the end of the week. "It doesn't matter if you fail," she said, "no one will know; I am sure THE BRITISH JOURNAL OF NURSING won't post it up."

The post graduate class owe an immense debt of gratitude to Sisters Olive and French, for lectures on subjects, of which all privileged to be present, must have been impressed that they are past mistresses.

BACTERIA.

Dr. Fairbairn, in his lecture to pupil midwives to which the post-graduate class were invited, said that though bacteria were evil creatures we could not get on without them as a whole. They often acted as scavengers.

The ideal conditions under which moulds grew would be found in a dark damp cellar, if it were warm in addition, so much the better. Bacteria were rather lower in the scale of vegetable life than moulds, and like conditions would be favourable to their growth. They could not grow without moisture. He instanced a piece of toasted bread, and a piece of soaked bread kept for a certain time in a dry place. The dry piece would remain as it was, but the sop would smell and eventually become mouldy. In hot climates meat was often dried to prevent putrefaction. Bacteria grew best at body temperature; cold or heat checked their growth.

Boiling killed them outright, though some spores would resist this for twenty minutes. Strong sunshine would kill bacteria. Some were averse to fresh air. In the gas gangrene so often met with on the battlefield the treatment was to open up, let in the air, and insert tubes.

Most cocci, like seeds, liked to find a suitable medium. The moment they fell on anything suitable they would grow. Dust was full of bacteria of all sorts and kinds, ordinarily putrefactive bacteria, but not pathogenic. The living cells of the body had a great objection to bacteria.

The seriousness of infection by bacteria would depend on two things:—

1. The virulence of the organism.
2. The resistance of the patient.

Dr. Fairbairn explained that the streptococcus, while it might in one patient produce perhaps from an old abscess, some degree of puerperal fever, yet this infection, if conveyed to another patient, increased in virulence, and the risk would be ten times as great. He explained also the difference between sapræmia and septicæmia.

Speaking of the former, he said that the uterus was a first-class incubation chamber—dark, warm, with debris where bacteria could live and enjoy themselves. The infection in sapræmia was enclosed in a sort of pocket, and did not escape into the actual blood stream.

In septicæmia the blood stream was infected and the infection was carried by it all over the body. Recovery would depend on the amount of the patient's resistance. In the case of retained membrane one had to remember in removing it that in scraping or scratching the uterine wall the blood cell fortifications (which he compared to wire entanglements) were destroyed, thus enabling the bacteria to escape into the blood stream, which was exactly what they wished. It was a question whether to leave these membranes alone or to scratch them away and risk septicæmia.

THURSDAY, MAY 20TH.

DEMONSTRATION IN MILK KITCHEN.

On Thursday morning Sister Morley gave a demonstration in the Milk Kitchen to a large and interested audience, on the preparation of modified milk for babies. Every pupil at the General Lying-in Hospital has to serve for a fortnight in this kitchen, where the feeds for all the hand-fed babies in the hospital are prepared. The amount for each baby for the 24 hours is carefully measured and mixed in correct proportions, divided into the number of feeds required, each feed put into a separate bottle, which is then sealed, until required for use, when the baby's own teat, which is kept in a separate enamel pot with lid, is attached.

The feeds are prepared with "top milk," *i.e.*, milk which has been allowed to stand for the cream to rise. The lower portion is then drawn off (easily accomplished by placing the milk in a douche can) and when the cream has risen, drawing

[previous page](#)

[next page](#)